

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Rely on Your Beliefs Fund

ADDRESS (number and street) ▼

209 Pennsylvania Avenue, SE

☐ Check if different than previously reported. (ACC)

Washington

DC

20003

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00344648

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☒ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
07 01 2013

through

M M M / D D D / Y Y Y Y Y Y  
07 31 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Paul Kilgore

Signature of Treasurer

Paul Kilgore

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
09 10 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Rely on Your Beliefs Fund

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 07 / 01 / 2013 To: M M / D D / Y Y Y Y Y Y 07 / 31 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> 2013		253973.48
(b) Cash on Hand at Beginning of Reporting Period.....	267956.19	
(c) Total Receipts (from Line 19) .....	37500.00	335050.42
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	305456.19	589023.90
7. Total Disbursements (from Line 31) .....	45484.63	329052.34
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	259971.56	259971.56
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Rely on Your Beliefs Fund

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
07 01 2013

To:

M M / D D / Y Y Y Y Y  
07 31 2013
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

8000.00

42500.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

8000.00

42500.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

29500.00

291000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

37500.00

333500.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

1550.42

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

37500.00

335050.42

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

37500.00

335050.42

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	25484.63	225552.34
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	25484.63	225552.34
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	100000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	3500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	3500.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	45484.63	329052.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	45484.63	329052.34

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	37500.00	333500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	3500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	37500.00	330000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	25484.63	225552.34
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	1550.42
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	25484.63	224001.92

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 20  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. James Derderian**

Mailing Address 4720 32nd St N

City

Arlington

State

VA

Zip Code

22207-4202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Stanton Park Group

Occupation

Principal

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

07 / 22 / 2013

Transaction ID : 30809.C1602

Amount of Each Receipt this Period

500.00

Receipt

Full Name (Last, First, Middle Initial)

**B. Reggie Dupre**

Mailing Address 201 Energy Pkwy Ste 500

City

Lafayette

State

LA

Zip Code

70508-3851

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dupre Logistics, LLC

Occupation

CEO

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

07 / 22 / 2013

Transaction ID : 30809.C1599

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

**C. William Graves**

Mailing Address 900 Whann Ave

City

Mc Lean

State

VA

Zip Code

22101-1538

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Trucking Assoc

Occupation

President

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

07 / 22 / 2013

Transaction ID : 30809.C1603

Amount of Each Receipt this Period

1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 20

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Gregg Hartley**

Mailing Address 857 Cedar Dr

City  
Deale

State  
MD

Zip Code  
20751-9613

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cassidy & Associates

Occupation  
Chief Operating Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY  
07 / 22 / 2013

**Transaction ID : 30809.C1604**

Amount of Each Receipt this Period

2500.00

Receipt

Full Name (Last, First, Middle Initial)

**B. Kevin Knight**

Mailing Address 19154 N 107th St

City  
Scottsdale

State  
AZ

Zip Code  
85255-6246

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
07 / 22 / 2013

**Transaction ID : 30809.C1600**

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

**C. Gary Salisbury**

Mailing Address 151 Hempstead 19

City  
Hope

State  
AR

Zip Code  
71801-9514

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fikes Truck Line

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
07 / 22 / 2013

**Transaction ID : 30809.C1609**

Amount of Each Receipt this Period

1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

4500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 20  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Steven Williams**

Mailing Address PO Box 15428

City  
Little Rock

State  
AR

Zip Code  
72231-5428

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Information Requested

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : 30809.C1601

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

8000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 20

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

## **A. American Urological Association PAC**

Mailing Address PO Box 15441

City  
Washington

State Zip Code  
DC 20003-0441

FEC ID number of contributing  
federal political committee.

**C** C00273003

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

**07** / **12** / **2013**

**Transaction ID : 30809.C1594**

Amount of Each Receipt this Period

3000.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. Anheuser-Busch PAC**

Mailing Address 1401 I St NW Ste 200

City  
Washington

State Zip Code  
DC 20005-6549

FEC ID number of contributing  
federal political committee.

**C** C00034488

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**07** / **12** / **2013**

**Transaction ID : 30809.C1597**

Amount of Each Receipt this Period

5000.00

Receipt

Full Name (Last, First, Middle Initial)

## **C. DirecTV PAC**

Mailing Address 901 F St NW Ste 600

City  
Washington

State Zip Code  
DC 20004-1429

FEC ID number of contributing  
federal political committee.

**C** C00331991

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**07** / **22** / **2013**

**Transaction ID : 30809.C1608**

Amount of Each Receipt this Period

2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

10500.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 20

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

## **A. General Electric PAC**

Mailing Address 1299 Pennsylvania Ave NW

City

Washington

State

DC

Zip Code

20004-2400

FEC ID number of contributing  
federal political committee.

C

C00024869

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

**Transaction ID : 30809.C1606**

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. Intl Council of Shopping Centers Inc PAC**

Mailing Address 555 12th St NW Ste 660

City

Washington

State

DC

Zip Code

20004-1241

FEC ID number of contributing  
federal political committee.

C

C00217638

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 12 / 2013

**Transaction ID : 30809.C1595**

Amount of Each Receipt this Period

2000.00

Receipt

Full Name (Last, First, Middle Initial)

## **C. National Cable & Telecommunications PAC**

Mailing Address 25 Massachusetts Ave NW Ste 100

City

Washington

State

DC

Zip Code

20001-1434

FEC ID number of contributing  
federal political committee.

C

C00010082

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

**Transaction ID : 30809.C1607**

Amount of Each Receipt this Period

5000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

8000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 20

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

## **A. National Tank Truck Carriers PAC**

Mailing Address 950 N Glebe Rd Ste 520

City State Zip Code  
Arlington VA 22203-4183

FEC ID number of contributing  
federal political committee.

**C** C00188011

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**MM / DD / YYYY**  
07 / 22 / 2013

**Transaction ID : 30809.C1605**

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. United Health Group PAC**

Mailing Address 701 Pennsylvania Ave NW Ste 530

City State Zip Code  
Washington DC 20004-2641

FEC ID number of contributing  
federal political committee.

**C** C00400135

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**MM / DD / YYYY**  
07 / 12 / 2013

**Transaction ID : 30809.C1596**

Amount of Each Receipt this Period

5000.00

Receipt

Full Name (Last, First, Middle Initial)

## **C. Verizon Wireless Good Govt Club**

Mailing Address 1300 I St NW Ste 400

City State Zip Code  
Washington DC 20005-3314

FEC ID number of contributing  
federal political committee.

**C** C00186288

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**MM / DD / YYYY**  
07 / 12 / 2013

**Transaction ID : 30809.C1598**

Amount of Each Receipt this Period

5000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

11000.00

**TOTAL** This Period (last page this line number only)..... ►

29500.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## Rely on Your Beliefs Fund

SEE BELOW

**[MEMO ITEM]**  
MEMO: PAC LODGING

PAC IT SERVICES

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## Rely on Your Beliefs Fund

**A. Professional Data Services, Inc.**

Mailing Address 2470 Daniels Bridge Rd Ste 121

City	State	Zip Code
Athens	GA	30606-6188

Purpose of Disbursement	PAC Compliance Consulting
-------------------------	---------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : 30708.E2606

Amount of Each Disbursement this Period

1501.84

PAC COMPLIANCE CONSULTING

Full Name (Last, First, Middle Initial)

**B. Professional Data Services, Inc.**

Mailing Address 2470 Daniels Bridge Rd Ste 121

City	State	Zip Code
Athens	GA	30606-6188

Purpose of Disbursement	PAC Compliance Consulting
-------------------------	---------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

07 / 30 / 2013

Transaction ID : 30809.E2632

Amount of Each Disbursement this Period

1504.34

PAC COMPLIANCE CONSULTING

Full Name (Last, First, Middle Initial)

### C. Restaurant Associates

Mailing Address PO Box 91337

City	State	Zip Code
Chicago	IL	60693-1337

Purpose of Disbursement
PAC Meeting Expense

Candidate Name \_\_\_\_\_

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : 30809.E2610

Amount of Each Disbursement this Period

630.00

PAC MEETING EXPENSE

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3636.18

Downloaded from <http://ajph.org/> on November 10, 2014

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## Rely on Your Beliefs Fund

12897.89

07 / 12 / 2013

730.07

12167.82

State:  District:

12897.89

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 20

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address PO Box 19769

City Irvine    State CA    Zip Code 92623-9769

Purpose of Disbursement  
PAC Telephone

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 26 / 2013
**Transaction ID : 30809.E2643**

Amount of Each Disbursement this Period

162.95

PAC TELEPHONE

Full Name (Last, First, Middle Initial)

**B. Visa**

Mailing Address PO Box 4512

City Carol Stream    State IL    Zip Code 60197-4512

Purpose of Disbursement  
See Below

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 12 / 2013
**Transaction ID : 30809.E2611**

Amount of Each Disbursement this Period

7458.50

SEE BELOW

Full Name (Last, First, Middle Initial)

**C. Williamsburg Inn**

Mailing Address 136 E Francis St

City Williamsburg    State VA    Zip Code 23185-4271

Purpose of Disbursement  
PAC Lodging

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 12 / 2013
**Transaction ID : 30809.E2613**

Amount of Each Disbursement this Period

1328.00

**[MEMO ITEM]**  
MEMO: PAC LODGING
**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7621.45

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## Rely on Your Beliefs Fund

441.80

**[MEMO ITEM]**  
MEMO: PAC LODGING

07 / 12 / 2013

30.50

**[MEMO ITEM]**  
MEMO: PAC MEETING EXPENSE

07 / 12 / 2013

225.00

**[MEMO ITEM]**  
MEMO: PAC EVENT SUPPLIES



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## Rely on Your Beliefs Fund

### A. UPS

Category/  
Type

41.44

**[MEMO ITEM]**  
MEMO: PAC SHIPPING

### B. Rush Imprint

Category/  
Type

1586.70

**[MEMO ITEM]**  
MEMO: PAC PRINTING

### C. AT&T

Category/  
Type

100.36

**[MEMO ITEM]**  
MEMO: PAC TELEPHONE

**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. White Elephant**

Mailing Address PO Box 2580

City Nantucket      State MA      Zip Code 02584-2580

Purpose of Disbursement  
PAC Event Facility and Lodging Fee

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07      12      2013
**Transaction ID : 30809.E2620**

Amount of Each Disbursement this Period

2550.00

**[MEMO ITEM]**

MEMO: PAC EVENT FACILITY AND LODGING FEE

Full Name (Last, First, Middle Initial)

**B. Dean & Deluca**

Mailing Address 2526 E 36th Cir N

City Wichita      State KS      Zip Code 67219-2300

Purpose of Disbursement  
PAC Event Catering

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07      12      2013
**Transaction ID : 30809.E2621**

Amount of Each Disbursement this Period

427.37

**[MEMO ITEM]**

MEMO: PAC EVENT CATERING

Full Name (Last, First, Middle Initial)

**C. Dan Williams**

Mailing Address 209 Pennsylvania Ave SE

City Washington      State DC      Zip Code 20003-1107

Purpose of Disbursement  
PAC Rent & Phones

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07      24      2013
**Transaction ID : 30809.E2629**

Amount of Each Disbursement this Period

474.36

PAC RENT &amp; PHONES

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►
474.36  
25459.88

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Enzi for US Senate**

Mailing Address PO Box 2775

City	State	Zip Code
Cody	WY	82414-2775

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**MICHAEL B ENZI**

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: WY District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2013

**Transaction ID : 30809.E2626**

Amount of Each Disbursement this Period

5000.00
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CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. Enzi for US Senate**

Mailing Address PO Box 2775

City	State	Zip Code
Cody	WY	82414-2775

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**MICHAEL B ENZI**

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: WY District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2013

**Transaction ID : 30809.E2625**

Amount of Each Disbursement this Period

5000.00
---------

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. Billy Long for Congress**

Mailing Address 1675 E Seminole St Ste F

City	State	Zip Code
Springfield	MO	65804-2454

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**BILLY LONG**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MO District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		24		2013

**Transaction ID : 30910.E2668**

Amount of Each Disbursement this Period

5000.00
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CONTRIBUTION

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Team Graham**

Mailing Address PO Box 1801

City	State	Zip Code
Columbia	SC	29202-1801

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**LINDSEY GRAHAM**

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: SC District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2013

**Transaction ID : 30809.E2624**

Amount of Each Disbursement this Period

5000.00
---------

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00
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20000.00
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